

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date:: April 12, 2004

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form  
(CRF)?::

Number of copies CRF::

Title:: Method And Apparatus for Delivering Natural Gas To Remote  
Locations

Attorney Docket Number:: SMA581/4-1CONUS

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure:: Figure 1

Total Drawing Sheets:: 2

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship

Country:: US

Status:: Full Capacity

Given Name:: William

Middle Name::

Family Name:: Perkins

Name Suffix::

City of Residence:: Houston

State or Province of

Residence:: Texas

Country of Residence:: US

Street of mailing address:: 2017 Morse

City of mailing address:: Houston

State or Province of

mailing address:: Texas

Country of mailing

address:: US

Postal or Zip Code of

mailing address:: 77019

Applicant Authority Type:: Inventor

Primary Citizenship

Country:: US

Status:: Full Capacity

Given Name:: Jeffrey

Middle Name:: P.

Family Name:: Beale

Name Suffix::

City of Residence:: Elkridge

State or Province of  
Residence:: Maryland

Country of Residence:: US

Street of mailing address:: 5267 Grovemont Drive

City of mailing address:: Elkridge

State or Province of  
mailing address:: Maryland

Country of mailing  
address:: US

Postal or Zip Code of  
mailing address:: 21075

## **Correspondence Information**

Correspondence Customer  
Number:: 22892

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing  
address::

Country of mailing address::

Postal or Zip Code of mailing  
address::

Phone number:: 713-758-2572

Fax Number:: 713-615-5427

E-Mail address:: ccravey@velaw.com

### **Representative Information**

Representative Customer Number::	22892	
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-OR-

<b>Representative Designation::</b>	<b>Registration Number::</b>	<b>Representative Name::</b>
<b>Primary or Associate</b>		

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	Continuation of	09/930,547	08/15/2001
09/930,547	An application claiming the benefit under 35 USC 119(e)	60/255,678	12/14/2000

### **Assignee Information**

Assignee name:: Small Ventures USA LLC